IC542

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UTILITY

PATENT APPLICATION

TRANSMITTAL

PTO/SB/05 (4/98) Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Attorney Docket No. JB0800 First Inventor or Application Identifier Malcolm et al.

provisional applications under 37 C.F.R. § 1.53(b) Express Mail Label No. EL226882780US

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	PPLICATION ELEMENTS apter 600 concerning utility patent application contents.	Assistant Commissioner for Patents Commissione					
1. X (St. 2. X Sp. (pro	tee Transmittal Form (e.g., PTO/SB/17)  submit an original and a duplicate for fee processing)  secification [Total Pages 59]  secretary arrangement set forth below)  sescriptive title of the Invention  cross References to Related Applications statement Regarding Fed sponsored R & D  seference to Microfiche Appendix	5. Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. X Computer Readable Copy b. X Paper Copy (identical to computer copy) c. X Statement verifying identity of above copies					
1	ackground of the Invention	ACCOMPANYING APPLICATION PARTS	-				
- B - B - D - A 3. <b>X</b> Dra 4. Oath or I a	Declaration  Copy from a prior application (37 C.F.R. § 1.63 (10 continuation/divisional with Box 16 completed)  Delation of the Disclosure (10 copy)  X Newly executed (original or copy)  Copy from a prior application (37 C.F.R. § 1.63 (10 completed))  Delation of Inventor(s) named in the prior application see 37 C.F.R. § 1.63 (d)(2) and 1.33 (b).  ITEMS 1 & 13:IN ORDER TO BE ENTIFLED TO PAY SMALL ENTIFICAL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT DIN'A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.27), EXCEPT DIN'A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.27).	7. Assignment Papers (cover sheet & document(s))  8. 37 C.F.R.§3.73(b) Statement Power of Attorney  9. English Translation Document (if applicable)  10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations  11. Preliminary Amendment  12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  13. Statement(s) Statement filed in prior applications  14. Certified Copy of Priority Document(s) (if foreign priority is claimed)  15. Other:					
Prior ap For CONTINU under Box 48	ontinuation Divisional Continuation-in-part ( plication information: Examiner  JATION or DIVISIONAL APPS only: The entire disclosure b, Is considered a part of the disclosure of the accompar	cupply the requisite information below and in a preliminary amendment:  CIP) of prior application No:/	d by				
	17. CORRESPOND	<u>and and the state of the state</u>	-				
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)							
Name	Jaye P. McLaughlin						
	Schering-Plough Corporation	on					
Address	2000 Galloping Hill Road						
City	Kenilworth State	New Jersey Zip Code 07033					
Country	- State	(908) 298-5056  Fax (908) 298-5388					
	USA Telephone	Registration No. (Approximate) 41 211	$\overline{}$				

Signature Burden Hour Statement: This form to estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (2/98)
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Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$) 982.00

Complete if Known					
Application Number					
Filing Date	To be Assigned				
First Named Inventor	Malcolm et al.				
Examiner Name	To be Assigned				
Group / Art Unit	To be Assigned				
Attorney Docket No.	JB0800				

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)						
1 The Commissioner is hereby authorized to charge	3. AD						
1. X in a Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	Large E Fee					Description	Fee Paid
Deposit Account 19–0365	Code	( <b>\$)</b> 130		le (\$)			· [ ee Falo
Number Deposit			205	65	Surcharge - late	•	
Account Name Schering-Plough Corp.	127	50	227	25	cover sheet.	provisional filing fee o	
Charge Any Additional Charge the Issue Fee Set in		130	139	130	Non-English spec	cification	
Fee Required Under 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance	147 2,	520	147	2,520	For filing a reque	st for reexamination	
	112 9	920*	112	920°	Requesting public Examiner action	cation of SIR prior to	.
2. Payment Enclosed: Check Money Other	113 1,8	840°	113	1,840	* Requesting public Examiner action	cation of SIR after	
	115 1	10	215	55	Extension for repl	ly within first month	
FEE CALCULATION	116 4	100	216	200	Extension for rep	ly within second mont	h
1. BASIC FILING FEE	117 9	950	217	475	Extension for repl	ly within third month	
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	118 1,5	510	218	755	Extension for repl	y within fourth month	
Code (\$) Code (\$)	128 2,0	060	228	1,030	Extension for repl	y within fifth month	
101 790 201 395 Utility filing fee <b>760.</b>	119 3	10	219	155	Notice of Appeal		
106 330 206 165 Design filing fee	120 3	10	220	155	Filing a brief in su	pport of an appeal	
107 540 207 270 Plant filing fee	121 2	70	221	135	Request for oral h	_	
108 790 208 395 Reissue filing fee	138 1,5	510	138 1	,510		e a public use proceed	ding
114 150 214 75 Provisional filing fee	140 1	10	240	55	Petition to revive	- unavoidable	
SUBTOTAL (1) (\$) 760.00	141 1,3	320	241	660	Petition to revive		
2. EXTRA CLAIM FEES Fee from	142 1,3				Utility issue fee (o	r reissue)	
Extra Claims below Fee Paid			243		Design issue fee Plant issue fee		_
Total Claims 28 -20** = 8 x 18. = 144. Independent 4 - 3** = 1 x 78. = 78.				335 130			
Independent 4 - 3** = 1 × 78. = 78.  Multiple Dependent			123	50	Petitions to the Co	ommissioner O provisional applicati	ans
**or number previously paid, if greater, For Reissues, see below	126 24	40 -	126	240		ormation Disclosure S	1 1
Large Entity Small Entity	581 4	40 5	581	40			
Fee Fee Fee Fee Description Code (\$) Code (\$)						atent assignment per imber of properties)	
103 22 203 11 Claims in excess of 20	146 79	90 2	246	395	Filing a submissio	n after final rejection	
102 82 202 41 Independent claims in excess of 3	149 79	90 2	249	395	(37 CFR 1.129(a))		
104 270 204 135 Multiple dependent claim, if not paid	140 /		. 73	333	For each additional examined (37 CFF		
109 82 209 41 ** Reissue independent claims over original patent	Other fee	(spec	ify) _			-	
110 22 210 11 **Reissue claims in excess of 20 and over original patent	Other fee	(spec	ify) _				
SUBTOTAL (2) (\$) 222. Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						)	
SUBMITTED BY						Complete (if a	applicable)
Typed or Printed Name Jaye P. McLaughlin						Reg. Number	41,211

SUBMITTED B	3Y	Complete (if applicable)			
Typed or Printed Name	Jaye P. McLaughlin .			Reg. Number	41,211
Signature	Jayon Laughler	Date 1124	1 ~/ X	Deposit Account User ID	19-0365

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